

Academic Honors and Core 40 Verification Form

For the Indiana Higher Education Grant Program

Administered by the State Student Assistance Commission of Indiana (SSACI)

Parents should keep a copy of this form

Students who file the Free Application for Federal Student Aid (FAFSA) by the SSACI March 10, 2004 receipt date deadline and qualify for the need-based Indiana Higher Education Grant program (IHEG) may receive additional IHEG grant funds. In order to qualify they must complete the Core 40 (C40) Curriculum with a cumulative grade point average of 2.0 on a 4.0 scale or earn the Academic Honors Diploma (AHD) with a cumulative grade point average of 3.0 on a 4.0 scale.

After April 1, 2004 check your student's record at the SSACI eStudent web site, www.ssaci.IN.gov/estudent/. Make sure your child's diploma status is correctly reported. If not, contact the high school. Also make sure the FAFSA is edit free for SSACI grant purposes. It is the family's responsibility to file the FAFSA by the March 10, 2004 SSACI Receipt Date Deadline and to correct SSACI edits by the June 1, 2004 Edit Correction Deadline.

or she has applie receipt date dead	his verification form may be required by your child's high sched for admission and financial aid. To be considered for the addline, this form must be completed and returned to your child'd meet the deadline. Failure to do so will prevent your child	dditional need-based IHEG C4 s high school by	0 or AHD funds, in addition to filing the . It is your responsibility	e FAFSA by the March 10, 2004 y to provide the correct
Parent Release:	I authorize the release of my child's name, date of birth and Social Security Number to SSACI so that he or she can be considered for the C40 or AHD enhancement to the need-based IHEG program. I understand that this information may be released to qualified colleges and universities to determine financial aid eligibility.			
	Parent's Signature (Mandatory)	Parent's Na	ame (Please Print)	
Student Name, Social Security Number, and				Accuracy is important – check the student's social security card to be sure the correct SSN
Date of Birth: (Mandatory) PLEASE	Student Last Name (as it appears on Social Security Card)	Student Fin	rst Name (as it appears on Social Security Ca	ard) is provided
PRINT	Student Social Security Number SSN (as it appears on Social Security Number SSN (as it appears of Social Securi	urity Card) Student Da	// te of Birth (MM/DD/CCYY as it appears on	birth certificate)
	FOR MORE INFORMATION ABOUT STATE O	GRANT PROGRAMS, VISIT TH	E SSACI WEB SITE: http://www.ssaci.IN.s	<u>gov</u>
	The following section to be completed by high scho	ool representative. Form to be k	ept on file at high school, not returned to S	SSACI.
School Name:				Academic Honors Core 40 Verification <u>Check only one</u>
Authorized Signature:	Based on seventh semester grades I certify that the C40 and AHD information submitted to SSACI is a true and accurate list of those students who are expected to graduate with either an Academic Honors Diploma with at least a 3.0 cumulative grade point average on a 4.0 scale; or a Core 40 Diploma with at least a 2.0 cumulative grade point average on a 4.0 scale.			
	I will modify the information sent to SSACI if the student's final grades reflect a different program (Core 40, AHD, or Neither) status than originally listed.			Academic Honors
	Name of Authorized School Representative S	Signature	— Date	